

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the linesProperty Casualty Insurers Association of America Political Action Committee (P-
CIPAC)

ADDRESS (number and street)

2600 South River Road

Check if different
than previously
reported. (ACC)

Des Plaines

IL

60018

3286

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00066472

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report (Q1)July 15
Quarterly Report (Q2)October 15
Quarterly Report (Q3)January 31
Quarterly Report (YE)July 31 Mid-Year
Report (Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the
State of

5. Covering Period

02

01

2010

through

02

28

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

June Holmes

Signature of Treasurer

Electronically Filed by June Holmes

Date

03

19

2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 20

Write or Type Committee Name

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

Report Covering the Period:

From:

M M
0 2D D
0 1Y Y Y Y
2 0 1 0

To:

M M
0 2D D
2 8Y Y Y Y
2 0 1 0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 Y Y Y Y 2010		162108.60
(b) Cash on Hand at Beginning of Reporting Period	102746.69	
(c) Total Receipts (from Line 19)	40893.56	50031.65
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	143640.25	212140.25
7. Total Disbursements (from Line 31)	-19000.00	49500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	162640.25	162640.25
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

Report Covering the Period:

From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	27841.35	31872.70
(ii) Unitemized	8052.21	13158.95
(iii) TOTAL (add Lines 11(a)(i) and (ii)	35893.56	45031.65
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	5000.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	40893.56	50031.65
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	40893.56	50031.65
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	40893.56	50031.65

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	0.00	0.00	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	0.00	0.00	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	-19500.00	48000.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	500.00	1500.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	-19000.00	49500.00	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	-19000.00	49500.00	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	40893.56	50031.65
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	40893.56	50031.65
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 20

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)

Westfield Employee Federal PAC

Mailing Address One Park Circle

City

Westfield Center

State

OH

Zip Code

44251

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 1 / 2 0 1 0

Transaction ID: 31271630

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 20

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)

Michael Mucher

Mailing Address 5 Teabury Lane

City

Andover

State

MA

Zip Code

01810-4864

FEC ID number of contributing federal political committee.

C

Name of Employer
Electric Insurance Group

Occupation

VP Sales & Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 8 / 2 0 1 0

Transaction ID: 31289073

Amount of Each Receipt this Period

240.00

B.

Full Name (Last, First, Middle Initial)

Thomas A Bottichio

Mailing Address 127 Abington Rd.

City

Danvers

State

MA

Zip Code

01923-4210

FEC ID number of contributing federal political committee.

C

Name of Employer
Electric Insurance Group

Occupation

VP & CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 8 / 2 0 1 0

Transaction ID: 31296104

Amount of Each Receipt this Period

240.00

C.

Full Name (Last, First, Middle Initial)

Mr. Robert W. Minto, Jr.

Mailing Address 912 Parkview Way

City

Missoula

State

MT

Zip Code

59803-2320

FEC ID number of contributing federal political committee.

C

Name of Employer
Attorneys Liability Protection Society

Occupation

Chairman and CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3600.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 4 / 2 0 1 0

Transaction ID: 31301597

Amount of Each Receipt this Period

3600.00

SUBTOTAL of Receipts This Page (optional)

4080.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 20

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)

Mr. David C. Cruikshank

Mailing Address 4716 18th Avenue, West

City

Bradenton

State

FL

Zip Code

34209-5120

FEC ID number of contributing federal political committee.

C

Name of Employer
Service Insurance Group

Occupation

President and CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 4 / 2 0 1 0

Transaction ID: 31301599

Amount of Each Receipt this Period

600.00

B.

Full Name (Last, First, Middle Initial)

Rex P Honodel

Mailing Address 228 Steuben Dr

City

Glen Allen

State

VA

Zip Code

23060

FEC ID number of contributing federal political committee.

C

Name of Employer
Southern States Insurance
Exchange

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 0 / 2 0 1 0

Transaction ID: 31302274

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Mr. Bernard M. Flynn

Mailing Address 274 Burning Tree Road

City

Delran

State

NJ

Zip Code

08075-1913

FEC ID number of contributing federal political committee.

C

Name of Employer
NJM Insurance Group

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 2 / 2 0 1 0

Transaction ID: 31309259

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

5850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 20

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)

Mr. James M. Sevey

Mailing Address 260 Alta Vista Avenue

City

Los Altos

State

CA

Zip Code

94022-2102

FEC ID number of contributing federal political committee.

C

Name of Employer
California Casualty Group

Occupation

EVP, Managing Director & General Couns

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 6 / 2 0 1 0

Transaction ID: 31330542

Amount of Each Receipt this Period

700.00

B.

Full Name (Last, First, Middle Initial)

Mr. Carl B Brown

Mailing Address 187 Rinconada Avenue

City

Palo Alto

State

CA

Zip Code

94301-3726

FEC ID number of contributing federal political committee.

C

Name of Employer
California Casualty Group

Occupation

President and CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 6 / 2 0 1 0

Transaction ID: 31330543

Amount of Each Receipt this Period

600.00

C.

Full Name (Last, First, Middle Initial)

Mr. J. Douglas Robinson

Mailing Address Box 530

City

Utica

State

NY

Zip Code

13503-0530

FEC ID number of contributing federal political committee.

C

Name of Employer
Utica National Insurance Group

Occupation

Chairman and Chief Executive Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 1 6 / 2 0 1 0

Transaction ID: 31377584

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional)

3300.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 20

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)

Jay S Bullock

Mailing Address 11750 5th Ave. Apt 5C

City

New York

State

NY

Zip Code

10029

FEC ID number of contributing
federal political committee.

C

Name of Employer
Argo Group International
Holdings, LtdOccupation
CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	1	0

Transaction ID: 31378644

Amount of Each Receipt this Period

600.00

B.

Full Name (Last, First, Middle Initial)

J. Cliff Walker

Mailing Address P. O Box 270

City

Columbia

State

TN

Zip Code

38402-0270

FEC ID number of contributing
federal political committee.

C

Name of Employer
Haulers Insurance Company,
Inc.Occupation
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	1	0

Transaction ID: 31378645

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Mr. Michael A Ray

Mailing Address 1337 Livingston Avenue

City

Pacifica

State

CA

Zip Code

94044-3929

FEC ID number of contributing
federal political committee.

C

Name of Employer
California Casualty GroupOccupation
SVP, CFO & Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	6	/	2	0	1	0

Transaction ID: 31378646

Amount of Each Receipt this Period

600.00

SUBTOTAL of Receipts This Page (optional)

1700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 20

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)

Mr. James Englese

Mailing Address 36283 Tudor Place

City

Newark

State

CA

Zip Code

94560-2655

FEC ID number of contributing federal political committee.

C

Name of Employer
California Casualty Group

Occupation

Deputy General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 7 / 2 0 1 0

Transaction ID: 31378647

Amount of Each Receipt this Period

700.00

B.

Full Name (Last, First, Middle Initial)

Mr. Patrick O Lynch

Mailing Address 4000 West 114th Street Suite 3000

City

Leawood

State

KS

Zip Code

66211-2674

FEC ID number of contributing federal political committee.

C

Name of Employer
California Casualty Group

Occupation

Vice President Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 9 / 2 0 1 0

Transaction ID: 31378648

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Jackie A. Gatlin

Mailing Address 7965 Ruststone Court

City

Colorado Springs

State

CO

Zip Code

80919-2921

FEC ID number of contributing federal political committee.

C

Name of Employer
California Casualty Group

Occupation

Vice President Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 2 / 2 0 1 0

Transaction ID: 31409937

Amount of Each Receipt this Period

600.00

SUBTOTAL of Receipts This Page (optional)

1600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 20

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)

Mr. Michael D. Bower

Mailing Address 259 La Casa Avae.

City

San Mateo

State

CA

Zip Code

94403-5014

FEC ID number of contributing federal political committee.

C

Name of Employer
California Casualty Group

Occupation

Sr VP Strategic Planning & Investments

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 3 / 2 0 1 0

Transaction ID: 31414237

Amount of Each Receipt this Period

600.00

B.

Full Name (Last, First, Middle Initial)

Mr. Thomas L. Richardson

Mailing Address 595 John Muir Drive, Apt. C-203

City

San Francisco

State

CA

Zip Code

94132-6136

FEC ID number of contributing federal political committee.

C

Name of Employer
California Casualty Management Company

Occupation

Division Claims Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 4 / 2 0 1 0

Transaction ID: 31414238

Amount of Each Receipt this Period

240.00

C.

Full Name (Last, First, Middle Initial)

Mr. Jeffrey Kusch

Mailing Address 11332 Trillium Lane North

City

Champlin

State

MN

Zip Code

55316-2685

FEC ID number of contributing federal political committee.

C

Name of Employer
Austin Mutual Insurance Company

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3600.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 4 / 2 0 1 0

Transaction ID: 31414368

Amount of Each Receipt this Period

3600.00

SUBTOTAL of Receipts This Page (optional)

4440.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 20

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)

Mr. Joseph C Muenzen

Mailing Address 1060 Deanna Dr.

City

Menlo Park

State

CA

Zip Code

94025-6617

FEC ID number of contributing
federal political committee.

C

Name of Employer
California Casualty Group

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	3	/	2	0	1	0

Transaction ID: 31414369

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mr. John E. Cahill, Jr.

Mailing Address 245 Laurel Grove Avenue

City

Kentfield

State

CA

Zip Code

94904-1538

FEC ID number of contributing
federal political committee.

C

Name of Employer
California Casualty Insurance Company

Occupation

Board Member

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	3	/	2	0	1	0

Transaction ID: 31414371

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

John W Mullen

Mailing Address 1940 Woodbridge Dr.

City

Mc Kinney

State

TX

Zip Code

75070-3904

FEC ID number of contributing
federal political committee.

C

Name of Employer
Unitrin Specialty

Occupation

President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	6	/	2	0	1	0

Transaction ID: 31414472

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional)

2750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 20

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)

Mr. Thomas J. Tierney

Mailing Address 253 Fairway Drive

City

South Burlington

State

VT

Zip Code

05403-5868

FEC ID number of contributing
federal political committee.

C

Name of Employer
Vermont Mutual Insurance
Group

Occupation

Chairman, President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 6 / 2 0 1 0

Transaction ID: 31416069

Amount of Each Receipt this Period

1200.00

B.

Full Name (Last, First, Middle Initial)

Mr. Gregory V. Ostergren

Mailing Address Corporate Centre
1949 East Sunshine

City

Springfield

State

MO

Zip Code

65899-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
American National Property
and Casualty

Occupation

Chairman, President and CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 0

Transaction ID: PR1456193323450

Amount of Each Receipt this Period

600.00

P/R Deduction (\$300.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

Ms. June T. Holmes

Mailing Address 409 S. Vine

City

Park Ridge

State

IL

Zip Code

60068-4145

FEC ID number of contributing
federal political committee.

C

Name of Employer
Property Casualty Insurers
Association

Occupation

Treasurer & COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 0

Transaction ID: PR1456336823450

Amount of Each Receipt this Period

300.00

P/R Deduction (\$150.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)

2100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 20

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)

Mr. Bruce D Trost

Mailing Address 13749 Bay Hill Court

City
Clive

State
IA

Zip Code
50325-8563

FEC ID number of contributing
federal political committee.

C

Name of Employer
FBL Financial Group

Occupation
Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

833.34

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 0

Transaction ID: PR1456453323450

Amount of Each Receipt this Period

416.67

P/R Deduction (\$416.67 Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Scott A. Joyner

Mailing Address 57 E. Delaware
#2105

City
Chicago

State
IL

Zip Code
60611-1476

FEC ID number of contributing
federal political committee.

C

Name of Employer
Property Casualty Insurers
Association

Occupation
Vice President Information Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 0

Transaction ID: PR1456541523450

Amount of Each Receipt this Period

213.00

P/R Deduction (\$106.50 Semi-Monthly)

C.

Full Name (Last, First, Middle Initial)

Mr. Benjamin J. McKay

Mailing Address 1401 South Joyce Street

City
Arlington

State
VA

Zip Code
22202-1874

FEC ID number of contributing
federal political committee.

C

Name of Employer
Property Casualty Insurers
Association

Occupation
Sr. VP Federal Government Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.68

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 0

Transaction ID: PR1695170223450

Amount of Each Receipt this Period

208.34

P/R Deduction (\$104.17 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)

838.01

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 20

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)

Mr Thomas R. Litjen

Mailing Address 3917 Barcroft Mews Court

City

Falls Church

State

VA

Zip Code

22041-1235

FEC ID number of contributing federal political committee.

C

Name of Employer
Property Casualty Insurers Association

Occupation

VP Federal Government Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.68

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 0

Transaction ID: PR1790384223450

Amount of Each Receipt this Period

208.34

P/R Deduction (\$104.17 Semi-Monthly)

B.

Full Name (Last, First, Middle Initial)

Mr. Kurt D Gallinger

Mailing Address 26777 Halsted Road

City

Farmington Hills

State

MI

Zip Code

48331-3577

FEC ID number of contributing federal political committee.

C

Name of Employer
Amerisure Companies

Occupation

VP Gov Rel & Counselor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 0

Transaction ID: PR2020349223450

Amount of Each Receipt this Period

120.00

P/R Deduction (\$60.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

David A. Sampson

Mailing Address 2435 Luckett Ave

City

Vienna

State

VA

Zip Code

22180-6819

FEC ID number of contributing federal political committee.

C

Name of Employer
Property Casualty Insurers Association

Occupation

President and CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

710.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 0

Transaction ID: PR2228336723450

Amount of Each Receipt this Period

355.00

P/R Deduction (\$177.50 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional)

683.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 20

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)

Marguerite Tortorello

Mailing Address 4711 North Kenmore

City

Chicago

State

IL

Zip Code

60640-5980

FEC ID number of contributing federal political committee.

C

Name of Employer
Property Casualty Insurers
Association

Occupation

Sr Vice President, Public Affairs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 0

Transaction ID: PR2357924923450

Amount of Each Receipt this Period

300.00

P/R Deduction (\$150.00 Se-
mi-Monthly)

B.

Full Name (Last, First, Middle Initial)

Paul Blume, JR

Mailing Address 430 W. sheridan Place

City

Lake Bluff

State

IL

Zip Code

60044-2327

FEC ID number of contributing federal political committee.

C

Name of Employer
Property Casualty Insurers
Association

Occupation

Sr VP State Government Relations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 0

Transaction ID: PR2400795623450

Amount of Each Receipt this Period

200.00

P/R Deduction (\$100.00 Se-
mi-Monthly)

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

27841.35

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

A.

B.

C.

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 / 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A.

Full Name (Last, First, Middle Initial)

IMPACT

Mailing Address 426 C St. NE

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement
Void - IMPACT

Candidate Name
IMPACT

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 31370119

Date of Disbursement

02 / 18 / 2010

Amount of Each Disbursement this Period

-1000.00

Void - IMPACT

B.

Full Name (Last, First, Middle Initial)

Klein For Congress

Mailing Address 21301 Powerline Road Suite 204

City
Boca Raton

State
FL

Zip Code
33433

Purpose of Disbursement
Void - Klein For Congress

Candidate Name
Rep. Ronald Klein

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: ☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 22

Transaction ID: 31404323

Date of Disbursement

02 / 26 / 2010

Amount of Each Disbursement this Period

-1000.00

Void - Klein For Congress

SUBTOTAL of Disbursements This Page (optional)

-2000.00

TOTAL This Period (last page this line number only)

-19500.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 / 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Property Casualty Insurers Association of America Political Action Committee (P-CIPAC)

A. Full Name (Last, First, Middle Initial)
Nicholas A. Micozzie Campaign

Mailing Address 6 South Springfield Road

City Clifton Heights State PA Zip Code 19018

Purpose of Disbursement
Nicholas Micozzie, STATE HOUSE 163rd PA

Candidate Name
Repr Nicholas Micozzie

Office Sought: ☒ House
☐ Senate
☐ President

State: PA District: 63

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

011
Category/
Type

Transaction ID: 31401794

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2010

Amount of Each Disbursement this Period

500.00

Nicholas Micozzie, STATE
HOUSE 163rd PA

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

500.00